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DATE:	July 23, 2003
TO:	Robert L. Nasser, Examiner, Art Unit 3736
COMPANY:	United States Patent and Trademark Office
FAX NUMBER:	703 308-0758
TOTAL NO. PAGES:	11
SENDER:	Jane Silarajs for Bernard E. Shay
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COMMENTS/MESSAGE: Re: Serial No. 09/540,319 Our Ref. LFS-093

Confirming our telephone conversation today, attached is a copy of the response mailed on March 11, 2003, together with a copy of the return receipt postcard. Thank you for your attention to this matter.

Regards,
Jane Silarajs

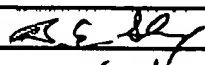
PTO/SB/21 (01-03)


Approved for use through 04/30/2003. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/540,319	
	Filing Date	03/31/2000	
	First Named Inventor	Robert Justice SHARTLE et al.	
	Art Unit	3736	
	Examiner Name	Robert L. NASSER	
Total Number of Pages In This Submission	6	Attorney Docket Number	LFS-093

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Bernard E. Shay Reg. No. 32,061	
Signature		
Date	3/10/03	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 03-11-2003			
Typed or printed	Jane Silaraajs		
Signature		Date	03-11-2003

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LFS-093

Title: <u>Electrically-Conductive Patterns for Monitoring the Filling of</u> <u>Cap Devices</u>		
Inventors/Applicant: <u>Shurtle, Robert et al.</u>		
Application Serial No.: <u>09/540319</u>	Filing Date: <u>03/31/2000</u>	
Type of Application: <input type="checkbox"/> Provisional <input type="checkbox"/> Original <input type="checkbox"/> CIP <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> CPA <input type="checkbox"/> PCT		
Transmittals <input type="checkbox"/> Transmittal of Patent Application <input type="checkbox"/> Specification and Abstract _____ pages <input type="checkbox"/> Claim _____ pages <input type="checkbox"/> Drawings _____ pages <input type="checkbox"/> Mailing Parts of Application Transmittal <input type="checkbox"/> Declaration/Oath <input type="checkbox"/> Decl./Power of Attorney <input type="checkbox"/> Power of Attorney <input type="checkbox"/> P. of Atty. by Assignee <input type="checkbox"/> Assignment/Form PTO 1595 _____ pages <input type="checkbox"/> PCT International Application Request Form _____ pages <input type="checkbox"/> Specification _____ pages <input type="checkbox"/> Claims _____ pages <input type="checkbox"/> Abstract _____ pages <input type="checkbox"/> Drawings _____ pages	Common US Items <input type="checkbox"/> Extension of time (____ mo.) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 with _____ references <input type="checkbox"/> Issue Fee <input type="checkbox"/> Formal Drawings Common PCT Items <input type="checkbox"/> Chapter II Request/Fee Sheet <input type="checkbox"/> Response-Invitation to Correct <input type="checkbox"/> Article 34 <input type="checkbox"/> Article 19 <input type="checkbox"/> Response to Written Opinion	Fee Related <input checked="" type="checkbox"/> Fee Transmittal (SR/17) <input type="checkbox"/> Filing Fee \$____ <input type="checkbox"/> Excess Dep. Clms. \$____ <input type="checkbox"/> Excess Ind. Clms. \$____ <input type="checkbox"/> Surcharge \$____ <input type="checkbox"/> Extension of time fee \$____ <input type="checkbox"/> Cont. Filing Rpt. Fee \$____ <input type="checkbox"/> Issue fee/adv. order \$____ <input checked="" type="checkbox"/> Other fee \$110
<input type="checkbox"/> Express Mail Certificate No. _____ <input checked="" type="checkbox"/> First Class Mail <input checked="" type="checkbox"/> Authorization to Charge Deposit Account No. 10-0750		<input checked="" type="checkbox"/> Other: <u>Response; Terminal Disclaimers</u> <u>PTA/SA/21; Postcard</u>
Attorney Docket No. <u>LFS-093</u>		Date Mailed: <u>03-11-2003</u>
Attorney: <u>BES</u>		Date Due: <u>04-05-2003</u>

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